U.S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of DONALD G. LAMB <u>and</u> DEPARTMENT OF THE NAVY, NAVAL AIR STATION, Jacksonville, Fla.

Docket No. 96-2445; Submitted on the Record; Issued August 25, 1998

DECISION and **ORDER**

Before MICHAEL J. WALSH, MICHAEL E. GROOM, BRADLEY T. KNOTT

The issues are: (1) whether the Office of Workers' Compensation Programs met its burden of proof to terminate appellant's compensation benefits effective March 2, 1996 on the grounds that appellant's disability due to a July 15, 1991 employment injury had ceased by that date; and (2) whether the Office properly terminated appellant's authorization for medical treatment on March 2, 1996.

On July 15, 1991 appellant, then a 32-year-old air craft worker, filed a notice of traumatic injury and claim for continuation of pay/compensation (Form CA-1) alleging that he sprained his left wrist while removing flaps. Appellant filed a claim for recurrence of disability on August 6 and September 30, 1991. Appellant stopped work on September 30, 1991. The Office accepted the claim for left wrist strain and placed him on the periodic rolls effective October 1, 1991. Appellant was reemployed effective July 20, 1992 and then laid off effective August 19, 1992. The Office placed appellant on the periodic rolls effective August 20, 1992. On September 25, 1995 appellant accepted an offer of employment by the employing establishment.¹

By letter dated March 7, 1995, the Office asked appellant to make an appointment with his physician and gave him some questions for Dr. John E.B. Harrison, a Board-certified orthopedic surgeon, to answer. Specifically, the Office requested appellant to ask Dr. Harrison whether his accepted employment injury had resolved or whether it was still causing active and objective symptoms.

By report dated March 30, 1995, Dr. Harrison, appellant's treating physician diagnosed recurrent painful dorsal ganglion in the left wrist. Dr. Harrison noted that appellant "has had significant ongoing symptoms related to his dorsal ganglion for the last 3 [to] 4 years."

¹ By letter dated October 26, 1995, the Office notified appellant that his monetary compensation was being reduced effective October 16, 1995 based upon his actual earnings. By letter dated December 19, 1995, the Office performed a loss of wage-earning capacity.

Dr. Harrison also noted that appellant stated that his wrist pain represented "an ongoing aggravation of an injury that he sustained in 1991 while he was working on an airplane flap." On physical examination, Dr. Harrison noted that appellant's range of motion in his wrist was full and there was no evidence of instability. Dr. Harrison offered no opinion as to the cause of appellant's ganglion cyst.

By letter dated June 27, 1995, the Office referred appellant to Dr. John Ambrosia, a Board-certified orthopedic surgeon, for a second opinion.

In a report dated July 12, 1995, Dr. Ambrosia, based upon a physical examination, statement of accepted facts, x-ray interpretation and review of the medical record, diagnosed a left dorsal carpal ganglion cyst. Dr. Ambrosia noted:

"There has never been a cause and effect relationship established between injuries, work related, traumatic or otherwise in ganglion cysts. Therefore, it is difficult if not impossible to determine that the present ganglion cyst situation is related to the July 15, 1991 injury. I would have to say that the wrist sprain or strain type injury has resolved. The objective physical findings on examination basically include the cystic feeling mass which is mildly tender."

Dr. Ambrosia further stated that appellant indicated that he was unable to perform his duties as an aircraft worker "because of the pain he gets in his wrist with heavy lifting."

By letter dated October 17, 1995, the Office requested clarification on whether appellant's ganglion cyst was related to his accepted employment injury.

In a letter dated November 1, 1995, Dr. Ambrosia opined that "it is extremely unlikely that the ganglion cysts" on appellant's left wrist was due to the accepted employment injury. Dr. Ambrosia further stated that "using a screwdriver could cause pain in a patient that had a ganglion cyst but the actual activity of using a screwdriver is very unlikely to one wherein a ganglion cyst would occur."

On January 10, 1996 the Office issued a notice of proposed termination of wage and medical compensation. The Office based its proposed termination on the opinion of Dr. Ambrosia, the second opinion specialist, who found in his July 12 and November 1, 1995 reports that appellant's ganglion cyst is unrelated to appellant's employment injury. The Office found that Dr. Harrison's report insufficient as the physician did not provide any opinion on a causal relationship between appellant's ganglion cyst and accepted employment injury. In the notice of proposed termination of compensation, appellant was advised that the Office proposed to terminate his compensation for wage loss and medical benefits.

In a decision dated February 27, 1996, the Office terminated the employee's compensation benefits effective March 2, 1996 on the grounds that appellant's disability from his accepted employment injury had ceased.

The Board finds that the Office met its burden of proof in terminating appellant's compensation for wage loss.

Once the Office accepts a claim, it has the burden of proving that the disability has ceased or lessened in order to justify termination or modification of compensation benefits.² After it has determined that an employee has disability causally related to his or her federal employment, the Office may not terminate compensation without establishing that the disability has ceased or that it is no longer related to the employment.³ Furthermore, the right to medical benefits for an accepted condition is not limited to the period of entitlement for disability. To terminate authorization of medical treatment, the Office must establish that appellant no longer has residuals of an employment-related condition which require further medical treatment.⁴

The weight of the medical evidence of record, as represented by the opinion of Dr. Ambrosia, the second opinion specialist and Board-certified orthopedic surgeon, supports that appellant has no disability due to the accepted employment injury of strain, left wrist. In a report dated July 12, 1995, Dr. Ambrosia stated that appellant's wrist strain had resolved. He also noted that appellant had a ganglion cyst. In a report dated November 1, 1995, Dr. Ambrosia opined that appellant's ganglion cyst was not caused by his accepted employment injury. Dr. Ambrosia also stated that if there had been any aggravation caused by appellant's using a screwdriver, it would have been temporary.

Dr. Harrison, appellant's treating Board-certified orthopedic surgeon, submitted a report dated March 30, 1995 in which he diagnosed that appellant had a ganglion cyst. Dr. Harrison failed to provide any medical rationale linking appellant's ganglion cyst with his accepted employment injury. This report is insufficient to establish that appellant's ganglion cyst is related to his employment injury as Dr. Harrison provided no opinion as to a causal relationship between appellant's ganglion cyst and his accepted employment injury. Thus, Dr. Ambrosia's opinion represents the weight of the medical evidence and the Office properly relied upon it to terminate appellant's compensation benefits.

The Board finds that Dr. Ambrosia's conclusion is rationalized and is based on an accurate factual and medical background. There is no rationalized medical opinion from appellant's attending physician supporting a continuing medical condition that is causally related to the July 15, 1991 employment injury.

The Board further finds that the Office properly terminated appellant's authorization for medical treatment on March 2, 1996.

The Office, to terminate authorization for medical treatment, has the burden of establishing that the employee no longer has residuals of the employment-related condition that requires further medical treatment.⁴ The Office met this burden through the report of Dr. Ambrosia, who concluded that appellant no longer had any residuals from his wrist sprain and provided rationale in support of that conclusion.

² Mohamed Yunis, 42 ECAB 325, 334 (1991).

³ Warren L. Divers, 47 ECAB ____ (Docket No. 95-2883, issued May 8, 1996); Frank J. Mela, Jr., 41 ECAB 115 (1989).

⁴ *Id*.

The decision of the Office of Workers' Compensation Programs dated February 27, 1996 is hereby affirmed.

Dated, Washington, D.C. August 25, 1998

> Michael J. Walsh Chairman

Michael E. Groom Alternate Member

Bradley T. Knott Alternate Member